

CIVIL APPEAL TRANSCRIPT INFORMATION (FORM D)

NOTICE TO COUNSEL: COUNSEL FOR THE APPELLANT MUST FILE THIS FORM WITH THE CLERK OF THE SECOND CIRCUIT IN ALL CIVIL APPEALS WITHIN 14 CALENDAR DAYS AFTER FILING A NOTICE OF APPEAL.

THIS SECTION MUST BE COMPLETED BY COUNSEL FOR APPELLANT		
CASE TITLE	DISTRICT	DOCKET NUMBER
	JUDGE	APPELLANT
	COURT REPORTER	COUNSEL FOR APPELLANT

<p>Check the applicable provision:</p> <p><input type="checkbox"/> I am ordering a transcript. <input type="checkbox"/> I am not ordering a transcript</p> <p>Reason for not ordering a transcript:</p> <p><input type="checkbox"/> Copy is already available <input type="checkbox"/> No transcribed proceedings <input type="checkbox"/> Other (Specify in the space below):</p>	<p>PROVIDE A DESCRIPTION, INCLUDING DATES, OF THE PROCEEDINGS FOR WHICH A TRANSCRIPT IS REQUIRED (i.e., oral argument, order from the bench, etc.)</p> <p>METHOD OF PAYMENT <input type="checkbox"/> Funds <input type="checkbox"/> CJA Voucher (CJA 21)</p>	
<p>INSTRUCTIONS TO COURT REPORTER:</p> <p><input type="checkbox"/> PREPARE TRANSCRIPT OF PRE-TRIAL PROCEEDINGS <input type="checkbox"/> PREPARE TRANSCRIPT OF TRIAL <input type="checkbox"/> PREPARE TRANSCRIPT OF OTHER POST-TRIAL PROCEEDINGS <input type="checkbox"/> OTHER (Specify in the space below):</p>	<p>DELIVER TRANSCRIPT TO: (COUNSEL'S NAME, ADDRESS, TELEPHONE)</p>	
COUNSEL'S SIGNATURE	DATE	
<p>COURT REPORTER ACKNOWLEDGMENT: This section is to be completed by the court reporter. Return one copy to the Clerk of the Second Circuit.</p>		
DATE ORDER RECEIVED	ESTIMATED COMPLETION DATE	ESTIMATED NUMBER OF PAGES
SIGNATURE OF COURT REPORTED		DATE